



NOV-30-2006 09:37 From: CNH NH PATENT

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10/11/2006

CNH AMERICA LLC

INTELLECTUAL PROPERTY LAW DEPARTMENT

700 STATE STREET

RACINE, WI 53404

11/30/2006 TIRANZ 00000002 140780 10619972

01 FC:1501 1400.00 DA  
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ANDREA J. MOWREY (Depositor's name)  
[Signature] (Signature)  
November 30, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/619,972	07/15/2003	Robert A. Malowick	12622	7832

TITLE OF INVENTION: CAB ARRANGEMENT FOR HARVESTING COMBINE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/11/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
TORRES, ALICIA M	3671	460-150000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Michael G. Harms

2 John William Stader

3 Stephen A. Bucchianeri

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CNH America LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

New Holland, Pennsylvania

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☐ Payment by credit card Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-0780 (enclose an extra copy of this form).

5 Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

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Date

11/28/06

Typed or printed name

Michael G. Harms

Registration No.

51780

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